

\*FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

COMMITTEE NAME (Must be same as on Statement of Organization)

**COMMITTEE TO ELECT RICK OLSON TO HOUSE OF REPRESENTATIVES**

IMPORTANT: Indicate by # type of committee you are reporting for: ☒ 1  
(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other  
Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political  
Subdivision PAC (11) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

**RICK OLSON**

Political Party (if applicable)

**DEMOCRAT**

Office Sought

**HOUSE OF REPRESENTATIVES**

District (if Senate or House)

**#68**

SIGNATURE OF PERSON FILING REPORT

I AM FILING A 1/19/09 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
(report date) Indicate by # ☒ 1

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in  
which Election is held

**STATEMENT OF CASH ON HAND**

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the  
committee. This amount **MUST** be the same as the cash on hand at the end  
of the last reporting period or must be zero if this is first report filed.)

\$ 3,942.81

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

1,575.00

Schedule F: Loans Received total (Attach Schedule F)

-

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

-

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$ 5,517.81

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

136.90

Schedule F: Loan Repayments total (Attach Schedule F)

-

CASH ON HAND at the end of this reporting period (if final report balance must  
be zero) (Attach DR-3)

\$ 5,380.91

\*UNPAID BILLS (From Schedule D - Attach Schedule D)

\$ -0-

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$ -00-

\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$ -0-

**CANDIDATE COMMITTEES ONLY:**

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ -0-

FORM  
DR-2

DISCLOSURE  
REPORT

(Rev. 07/2004)

For Office Use Only

Comm. #

Logged In

Scanned

Computer

Audited

**1540**

Late reports are subject to  
possible civil and criminal  
penalties.

**515-778 7063**  
TELEPHONE

**1/19/09**  
DATE SIGNED

For Instructions, See Back of Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT RICK ALSEN TO HOUSE OF REPRESENTATIVES

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
1/07/08	ID# CK# 1090233	DAVE PETZOLD ALTUS OIL		\$ 500 <sup>00</sup>	
1/07/08	ID# 1560 CK# 002446	UNITED TRANSPORTATION POLITICAL ACTION COMMITTEE 14600 DETROIT AV CLEVELAND, OH 44107		500 <sup>00</sup>	
11/20/08	ID# 6435 CK# 1139	IOWA INSURANCE INSTITUTE PAC 729 INSURANCE EXCHANGE BLDG DES MOINES, IA 50309		25 <sup>00</sup>	
11/20/08	ID# 6216 CK# 4570000254	NATIONWIDE MUTUAL INSURANCE CO IOWA PAC 1100 LOCUST ST DES MOINES, IA 50309		350 <sup>00</sup>	
2/10/08	ID# 6001 CK# 18690	IBEW EDUCATIONAL COMMITTEE 900 SEVENTH ST N.W WASHINGTON, DC 20001		200 <sup>00</sup>	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				

SUB-TOTAL

TOTAL (if last page of this schedule)

\$  
\$1575<sup>00</sup>

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by age). If surname of contributor is the same as candidate, but there is no actual relationship, enter "not applicable" in the relationship column.

Page 1 of 1  
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

# EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

COMMITTEE TO ELECT RICK OLSON TO HOUSE OF REPRESENTATIVES

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/3/08	CK# N/A	BANK OF AMERICA PO BOX 25118 TAMPA, FL 33622-5118	SERVICE CHARGE	\$ 5.00
10/14/08	CK# 1263	UNITED STATES POSTMASTER 4815 MAPLE DR PLEASANT HILL IA 50327	BALANCE CORRECTION FOR 10/14/08 DISCLOSURE	(.60)
12/1/08	CK# 1268	CARTER PRINTING 1739 E GRANITE DES MOINES IA 50316	CARD PRINTING	132.50
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			

SUB-TOTAL \$ 136.90  
TOTAL (if last page of this schedule) \$ 136.90

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to schedule G instructions and Iowa Code 68A.402(3)(i).)